Image# 11971834568 PAGE 1 / 40

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

_		Office Use Only
1.	NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
Α	merican Academy of	Family Physicians Political Action Committee
Ш		
ΑD	DRESS (number and street)	2021 Massachusetts Avenue, NW
	Check if different than previously reported. (ACC)	Washington DC 20036
2.	FEC IDENTIFICATION N	IMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
	C C00411553	3. IS THIS REPORT X (N) OR AMENDED (A)
4.	TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Compared on the content of the	PRE-Election Report for the: Convention (12C) Special (12G) Runoff (12R) Primary (12P) General (12G) Runoff (12R) Funding (12P) Fundi
	(TER)	Election on State of
5.	Covering Period 10	01 2011 through 10 31 2011
l ce	ertify that I have examined th	is Report and to the best of my knowledge and belief it is true, correct and complete.
Тур	oe or Print Name of Treasure	Randell K. Wexler, MD
Sig	nature of Treasurer Rand	ell K. Wexler, MD [Electronically Filed] Date 11 2011
NO	TE: Submission of false, erron	eous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.
	Office Use	FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

2011 2011 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 253762.79 January 1, 2011 (b) Cash on Hand at 325038.65 Beginning of Reporting Period.....

604072.67

350309.88

276490.93

7. Total Disbursements (from Line 31)......

16331.90

18874.99

Cash on Hand at Close of
 Reporting Period
 (subtract Line 7 from Line 6(d)).......

(c) Total Receipts (from Line 19)

327581.74

327581.74

Debts and Obligations Owed **TO**the Committee (Itemize all on
Schedule C and/or Schedule D).....

0.00

Debts and Obligations Owed BY
 the Committee (Itemize all on Schedule C and/or Schedule D)

0.00

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Academy of Family Physicians Political Action Committee

I. Receipts	COLUMN A	COLUMN B
	Total This Period	Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	14400.00	054570 47
(i) Itemized (use Schedule A)	14486.20	251572.47
(ii) Unitemized	3055.41	91814.94
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	17541.61	343387.41
(h) Balitiaal Barty Consustitua	0.00	0.00
(b) Political Party Committees	0.00	7 7
(c) Other Political Committees	0.00	0.00
(such as PACs)		3.00
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	17541.61	343387.41
Totals to Line 33, page 5)		
Party Committees	0.00	0.00
rary committees	0.00	0.00
B. All Loans Received	0.00	0.00
7. THE EDUTE TROOPERS		7 7
L. Lean Danaymanta Dassiyad	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	1333.38	6922.47
6. Refunds of Contributions Made	7	0022.11
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	0.00	0.00
B. Transfers from Non-Federal and Levin Funds	7	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
, ,	7	
(b) Levin Funds (from Schedule H5)	0.00	0.00
(b) Leviii i unus (iioiii Schedule 115)		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(6) Total Transiers (add 16(d) and 16(b))	7	0.00
9. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	18874.99	350309.88
). Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	18874.99	350309.88

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calcinati Total to Date
	(i) Federal Share	0.00	0.00
	(ii) Non Fodoval Chare	0.00	0.00
	(ii) Non-Federal Share(b) Other Federal Operating	0.00	5.50
	Expenditures	831.90	6490.93
	(c) Total Operating Expenditures	921.00	6400.03
,	(add 21(a)(i), (a)(ii), and (b))▶ Transfers to Affiliated/Other Party	831.90	6490.93
	Committees	0.00	0.00
3.	Contributions to Federal Candidates/Committees and Other Political Committees	15500.00	270000.00
	Independent Expenditures		
j.	(use Schedule E)	0.00	0.00
•	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans MadeRefunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))▶	0.00	0.00
).	Other Disbursements	0.00	0.00
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	16331.90	276490.93
	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	16331.90	276490.93

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures			
3. Total Contributions (other than loans) (from Line 11(d), page 3)	17541.61	343387.41	
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17541.61	343387.41	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	831.90	6490.93	
7. Offsets to Operating Expenditures (from Line 15, page 3)	1333.38	6922.47	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	-501.48	-431.54	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE	6	OF	40
(che	eck only	or	ne)					
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	13		14		15	16	6	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Committ	tee		
Full Name (Last, First, Middle Initial) A. David W Avery MD		Date of Receipt		
Mailing Address 3702 1St Ave		10 01 2011		
City Vienna	State Zip Code WV 26105-1610	Transaction ID : C1422178 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	1000.00		
Name of Employer Marietta Health Care	Occupation Physician			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00			
Full Name (Last, First, Middle Initial) 3. Jeffrey D Bachtel MD Mailing Address 182 East Ave		Date of Receipt		
City Tallmadge FEC ID number of contributing federal political committee.	State Zip Code OH 44278-2311	10 31 2011 Transaction ID : C1498408 Amount of Each Receipt this Period 45.63		
Name of Employer Summa Physicians, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 365.04			
Full Name (Last, First, Middle Initial) Jeffrey D Bachtel MD		Date of Receipt		
Mailing Address 182 East Ave City Tallmadge	State Zip Code OH 44278-2311	10 31 2011 Transaction ID : C1498409 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period 45.63		
Name of Employer Summa Physicians, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Physician Aggregate Year-to-Date ▼ 365.04			
SUBTOTAL of Receipts This Page (optional)	•	1091.26		
TOTAL This Period (last page this line numb	er only)			

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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
,	ily Physicians Political Action Comm	ittee
Full Name (Last, First, Middle Initial) Jeffrey D Bachtel MD		Date of Receipt
Mailing Address 182 East Ave		10 31 2011
City	State Zip Code	Transaction ID : C1503210
Tallmadge	OH 44278-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.63
Name of Employer	Occupation	
Summa Physicians, Inc.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	365.04	
Full Name (Last, First, Middle Initial) Jeffrey D Bachtel MD	·	Date of Receipt
Mailing Address 182 East Ave	10 31 2011	
City	Transaction ID : C1503211	
Tallmadge	OH 44278-2311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.63
Name of Employer	Occupation	
Summa Physicians, Inc.	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.04	
Full Name (Last, First, Middle Initial)		Date of Bossint
Mailing Address 32 Mark Cir		Date of Receipt
City.	Ctata 7in Cada	10 24 2011
City Holden	State Zip Code MA 01520-1410	Transaction ID : C1451956
	W/A 01020-1410	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
UMMHC	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (option	nal)	141.26
TOTAL This Period (last page this line nu	mber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOF	FOR LINE NUMBER:					8	OF	40	
(che	ck only	or	ne)						
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

\rangle	American Academy of Family Pl	hysicians Political Action Committe	ee
Α.	Full Name (Last, First, Middle Initial) Reid B Blackwelder MD		Date of Receipt
	Mailing Address 4407 Leedy Rd		10 20 2011
	City Kingsport	State Zip Code TN 37664-2117	Transaction ID : C1498404 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	100.00
	Name of Employer East Tennessee State University	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Robert C M Bourne MD		Date of Receipt
	Mailing Address 1300 E Cooley Dr		10 25 2011
	City Colton	State Zip Code CA 92324-3905	Transaction ID : C1452015 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	30.42
	Name of Employer Beaver Medical Group	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 334.62	
<u> </u>	Full Name (Last, First, Middle Initial) Kathryn Brandt DO		Date of Receipt
	Mailing Address 180 Ingraham Mtn Rd		10 05 2011
	City Augusta	State Zip Code ME 04330-8431	Transaction ID : C1425926 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	50.00
	Name of Employer	Occupation Residency Faculty Physician	
	Maine-Dartmouth Family Medicine Reside Receipt For: Primary General Other (specify) ▼	Residency Faculty Physician Aggregate Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)	_	180.42

TOTAL This Period (last page this line number only).....

FOR LINE	NUMBER	: PAGE	E 9 OF	40
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or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	g the name and address of any political committee	to solicit contributions from such committee.
,	ly Physicians Political Action Commi	ttee
Full Name (Last, First, Middle Initial) June G Bredin MD		Date of Receipt
Mailing Address 4924 153Rd PI Sw		10 22 2011
City	State Zip Code	Transaction ID : C1451924
Edmonds	WA 98026-4435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer	Occupation	
Sate of Washington DSHS	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	280.00	
Full Name (Last, First, Middle Initial) Tony William Butruille MD	1	Date of Receipt
Mailing Address 817 Commercial St		M = M / D = D / Y = Y = Y
City	10 18 2011	
Leavenworth	State Zip Code WA 98826-1316	Transaction ID : C1449225
	00020 1010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
Cascade Medical Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	225.00	
Full Name (Last, First, Middle Initial) . Mary F Campagnolo MD		Date of Receipt
Mailing Address 1561 Route 38 Ste 6		10 21 2011
City	State Zip Code	Transaction ID : C1451234
Lumberton	NJ 08048-2939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Virtua Medical Group, Marlton NJ		
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (options	al)	440.00
TOTAL This Period (last page this line nur	mber only)	

	FOR LINE	NUMBER:	PAGE	= 10 OF
Use separate schedule(s)	(check onli	y one)		
for each category of the Detailed Summary Page	X 11a	11b	11c	12
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Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family F	Physicians Political Action Committ	ee
Full Name (Last, First, Middle Initial) Josiah Mark Carr II Mailing Address 1313 Ravenhurst Dr		Date of Receipt
Ste 205	State 7:- Onda	10 25 2011
City Raleigh	State Zip Code NC 27615-5462	Transaction ID : C1452012
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 365.00
Name of Employer Piedmont Medical Associates	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) Cory D Carroll MD Mailing Address 1040 E Elizabeth St Ste 2		Date of Receipt
		10 17 2011
City	State Zip Code	Transaction ID : C1433286
Fort Collins	CO 80524-3952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Self Employed	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. Lee Marvin Carter MD		Date of Receipt
Mailing Address PO BOX 506		10 28 2011
City Huntingdon	State Zip Code TN 38344-0506	Transaction ID : C1453318 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	
Self-Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		515.00
TOTAL This Period (last page this line number	only)	

FC	JK LIM	E MOMBER	: PAGE	III OF	40		
(ch	(check only one)						
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Name of Employer University of Oklahoma Receipt For:	NAME OF COMMITTEE (In Full)	the name and address of any political committee Physicians Political Action Commi	
Mailing Address 14575 S Bryant Ave City Edmond OK 73034-8139 FEC ID number of contributing federal political committee. Cocupation Physician Aggregate Year-to-Date ▼ City State Zip Code OK 73034-8139 Cocupation Physician Aggregate Year-to-Date ▼ City Name (Last, First, Middle Initial) Cohn Howard Darnell MD Mailing Address 320 Sunset Dr City City Ashland FEC ID number of contributing federal political committee. Cocupation Physician Fec ID number of contributing federal political committee. Cocupation Physician Aggregate Year-to-Date ▼ Cocupation Cocupation Physician Aggregate Year-to-Date ▼ Cocupation Physician Aggregate Year-to-Date ▼ Cocupation Co	Full Name (Last, First, Middle Initial) Steven A Crawford MD Mailing Address 900 Ne 10Th St City Oklahoma City FEC ID number of contributing federal political committee. Name of Employer University of Oklahoma Receipt For: Primary General	State Zip Code OK 73104-5420 C Occupation Physician Faculty Aggregate Year-to-Date ▼	Date of Receipt 10 16 2011 Transaction ID : C1498402
Full Name (Last, First, Middle Initial) John Howard Darnell MD Mailing Address 320 Sunset Dr City Ashland FEC ID number of contributing federal political committee. Name of Employer Family Medicine Center, PLLC Receipt For: Primary General Other (specify) Aggregate Year-to-Date 210.00	Manuel O Crespo DO Mailing Address 14575 S Bryant Ave City Edmond FEC ID number of contributing federal political committee. Name of Employer Vital Inpatient Physician Services Receipt For: Primary General	OK 73034-8139 C Occupation Physician Aggregate Year-to-Date ▼	10 10 2011 Transaction ID : C1427068 Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	Full Name (Last, First, Middle Initial) John Howard Darnell MD Mailing Address 320 Sunset Dr City Ashland FEC ID number of contributing federal political committee. Name of Employer Family Medicine Center, PLLC Receipt For: Primary General	State Zip Code KY 41101-2168 C Occupation Physician Aggregate Year-to-Date ▼	10 15 2011 Transaction ID : C1432664
·	SUBTOTAL of Receipts This Page (optional)	<u> </u>	408.96

FOR LINE NUMBER:				PAGE	•	12	OF	40		
(check only one)										
×	11a		11b		11c		12			
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or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	ily Physicians Political Action Comm	ITTEE
Jose M David MD		Date of Receipt
Mailing Address 804 Huntington Ct		10 06 2011
City	State Zip Code	Transaction ID : C1426050
Albany	NY 12203-6015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer	Occupation	
Prime Care Physicians PLLC	Family Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	3750.00	
Full Name (Last, First, Middle Initial) Martha A David MD	'	Date of Receipt
Mailing Address 1 Skidmore Dr		10 20 2011
City	State Zip Code	Transaction ID : C1450712
Spencerport	NY 14559-9535	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	365.00
Name of Employer	Occupation	_
Lifetime Health	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address 1 Prime Care Dr		Date of Receipt
City	State Zip Code	10 11 2011
Selmer	TN 38375-1864	Transaction ID : C1427696
	33010 1004	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Prime Care Med Ctr	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (option	nal)	1240.00
	·	
TOTAL This Period (last page this line nu	mber only)	

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) for each category of the Detailed Summary Page

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	13		14		15		16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

Full Name (Last, First, Middle Initial) Doreen E Feldhouse MD Mailing Address 1043 Sir James Ave		Date of Receipt
		10 02 2011
City	State Zip Code TN 38024-7344	Transaction ID : C1422345
Dyersburg	TN 38024-7344	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Family Care, PC	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Wanda D Filer MD		Date of Receipt
Mailing Address 510 Aqua Ct		M = M / D = D / Y = Y = Y
City	State Zip Code	10 14 2011
York	PA 17403-3623	Transaction ID : C1431930 Amount of Each Receipt this Period
FEC ID number of contributing		Amount of Lacif Neceipt this Pellod
federal political committee.	C	350.00
Name of Employer	Occupation	
Strategic Health Institute	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	3500.00	
Full Name (Last, First, Middle Initial) Seth Yawki Flagg MD	1	Date of Receipt
Mailing Address 9129 Bradford Rd		10 03 2011
City	State Zip Code	Transaction ID : C1422563
Silver Spring	MD 20901-4917	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	35.00
Name of Employer	Occupation	
USN	Doctor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	

SCHEDULE A (FEC Form 3Y) П

CHEDOLL A (FLC FOIII 3X)		FOR LINE NUME			H: [PAGE	14	OF	40	
TEMIZED RECEIPTS	Use separate schedule(s)	(check only one)								
	for each category of the Detailed Summary Page	X	11a	11b	1	1c	12	2		
			13	14		5	16	6	17	
ny information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions r for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.										

NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Michael O Fleming MD Date of Receipt Mailing Address 556 Dunmoreland Dr 10 02 2011 City State Zip Code Transaction ID: C1422346 LA 71106-6125 Shreveport Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Chief Medical Officer Amedisys, Inc Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Christopher H Gaynor MD Date of Receipt Mailing Address 6300 9Th Ave Ne Ste 300 10 2011 14 City State Zip Code Transaction ID: C1431931 WA Seattle 98115-8516 Amount of Each Receipt this Period FEC ID number of contributing 52.14 federal political committee. Name of Employer Occupation Self Employed Family Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 260.70 Other (specify) Full Name (Last, First, Middle Initial) c. Roland Adolph Goertz MD Date of Receipt Mailing Address 1600 Providence Dr 2011 10 22 City State Zip Code Transaction ID: C1498405 TX Waco 76707-2261 Amount of Each Receipt this Period FEC ID number of contributing C 416.67 federal political committee. Name of Employer Occupation Physician Family Practice Center Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 4166.70 718.81 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) X 11a 11b 11c

15 OF

40

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Gregory K Griggs Date of Receipt Mailing Address NC AFP - Exec Vice Pres PO Box 10278 2011 10 City State Zip Code Transaction ID: C1427688 NC 27605-0278 Raleigh Amount of Each Receipt this Period FEC ID number of contributing 45.63 federal political committee. Name of Employer Occupation NC AFP NC AFP - Exec Vice Pres Receipt For: Aggregate Year-to-Date ▼ Primary General 273.78 Other (specify) Full Name (Last, First, Middle Initial) B. Bob Arvid Grubbs MD Date of Receipt Mailing Address 9817 Farmington Rd 10 09 2011 City State Zip Code Transaction ID: C1427055 AL Tuscaloosa 35405-9427 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation University Family Practice, P.C. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Boyde Jerome Harrison MD Date of Receipt Mailing Address 904 26th Street 2011 10 10 City State Zip Code Transaction ID: C1427097 AL Haleyville 35565-0655 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 660.63 SUBTOTAL of Receipts This Page (optional).....

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TOTAL This Period (last page this line number only).....

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	nd Statements may not be sold or used by any per g the name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Academy of Family	y Physicians Political Action Commi	ttee
Full Name (Last, First, Middle Initial) Lori J Heim MD		Date of Receipt
Mailing Address 250 Hollybrook Farm Ln		10 28 2011
City	State Zip Code	Transaction ID : C1453314
Vass	NC 28394-8952	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	416.67
Name of Employer	Occupation	1
Scotland Memorial Hospital	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	33 3	
Other (specify) ▼	4166.70	
Full Name (Last, First, Middle Initial) Daniel J Heinemann MD		Date of Receipt
Mailing Address PO BOX 5039		10 11 2011
City	State Zip Code	Transaction ID : C1427687
Sioux Falls	SD 57117-5039	Amount of Each Receipt this Period
FEC ID number of contributing		T
federal political committee.	C	225.00
Name of Employer	Occupation	
Sioux Valley Health Systems	Physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	2250.00	
Full Name (Last, First, Middle Initial) David Standish Hoskins MD		Date of Receipt
Mailing Address PO BOX 2200		10 10 2011
City	State Zip Code	Transaction ID : C1427066
Minden	NV 89423-2200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.63
Name of Employer	Occupation	
Self Employed	Physician	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	30 0	
Other (specify) ▼	273.78	
SUBTOTAL of Receipts This Page (optional	l) >	687.30
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SCHEDULE A (FEC Form 3X) ITEMIZ

ZED RECEIPTS		FU	K LINE	NOMBER:	PAGI	E 17 OI		ŧU		
	Use separate schedule(s) for each category of the	(check only one)								
	Detailed Summary Page	<u> </u>	11a	11b	11c	12				
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	statements may not be sold or used by any persole name and address of any political committee to	
NAME OF COMMITTEE (In Full)	••	
` '	Physicians Political Action Committe	ee
Full Name (Last, First, Middle Initial) A. Elvin C Irvin MD		Date of Receipt
Mailing Address 555 E Cheves St		10 16 2011
City	State Zip Code	Transaction ID : C1432938
Florence	SC 29506-2617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	
Baptist Health Care	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Jessica Johnson		Date of Receipt
Mailing Address 38 Hall St		10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : C1432721
Newington	CT 06111-2553	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	35.00
Name of Employer	Occupation	
N/A	Student	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. Michael A Kalinosky DO		Date of Receipt
Mailing Address 220 W South St		10 26 2011
City	State Zip Code	Transaction ID : C1452530
Viroqua	WI 54665-1946	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Gundenstan Lutheran	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	210.00	
SUBTOTAL of Receipts This Page (optional)		115.00
TOTAL This Period (last page this line number	only)	

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	statements may not be sold or used by any personal ename and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Academy of Family P	hysicians Political Action Committe	ee
Full Name (Last, First, Middle Initial) Christina Marie Kelly MD		Date of Receipt
Mailing Address 2104 Addax Trl		10 28 2011
City	State Zip Code	Transaction ID : C1453311
Harker Heights	TX 76548-2351	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Multicare Health System	Family Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Bradon Y Kimura MD		Date of Receipt
Mailing Address 81-937 Halekii St Ste 4		M = M / D = D / Y = Y = Y
Ste 4		10 19 2011
City	State Zip Code	Transaction ID : C1450332
Kealakekua	HI 96750-8182	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	
Bradon Kimura MD Inc	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	365.00	
Full Name (Last, First, Middle Initial) C. Susan Karen Kinast-Porter MD		Date of Receipt
Mailing Address 2302 11Th St		10 20 2011
City	State Zip Code	Transaction ID : C1450710
Monroe	WI 53566-1811	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Monroe Clinic TMC	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		915.00
TOTAL This Period (last page this line number	only)	

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NAME OF COMMITTEE (In Full)	the name and address of any political committee Physicians Political Action Commi	
Full Name (Last, First, Middle Initial) Laura C Knobel MD Mailing Address 3 Freedom Way City Walpole	State Zip Code MA 02081-2290	Date of Receipt 10 17 2011 Transaction ID : C1433287 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	Occupation Physician Aggregate Year-to-Date ▼ 1350.00	150.00
Full Name (Last, First, Middle Initial) Kevin K Kurohara MD Mailing Address 75 Puuhonu PI Ste 205 City Hilo FEC ID number of contributing	State Zip Code HI 96720-2000	Date of Receipt 10 27 2011 Transaction ID : C1452576 Amount of Each Receipt this Period
Receipt For: Primary Other (specify) General	Occupation Physician Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Paul Alan Lazar MD Mailing Address G3230 Beecher Rd Ste 1 City Flint FEC ID number of contributing federal political committee. Name of Employer McLaren Receipt For: Primary General	State Zip Code MI 48532-3604 C Occupation Physician Aggregate Year-to-Date ▼	Date of Receipt 10 14 2011 Transaction ID : C1427694 Amount of Each Receipt this Period 182.50
Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional).	365.02	832.50

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Any information copied from such Reports an or for commercial purposes, other than using	d Statements may not be sold or used by any per the name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Leah Raye R Mabry MD Mailing Address 339 S Presa St		Date of Receipt
City	State 7in Code	10 21 2011
City San Antonio	State Zip Code TX 78205-3425	Transaction ID : C1451231
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Christus Health Care	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Michael L Madden MD Mailing Address 4907 Windermere Blvd		Date of Receipt
		10 20 2011
City	State Zip Code	Transaction ID : C1450714
Alexandria	LA 71303-2459	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer L.S. U. HSC	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) C. Kevin B Martin MD		Date of Receipt
Mailing Address 2903 219th Ave E		10 28 2011
City Lake Tapps	State Zip Code WA 98391-5634	Transaction ID : C1453317
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	1
Sound Family Medicine	Physician	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 900.00	
Callet (opening)		POP 53
SUBTOTAL of Receipts This Page (optional)	<u> </u>	565.00
TOTAL This Period (last page this line numb	per only)	

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Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may not be sold or used by any per- the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) 1. John S Meigs Jr		Date of Receipt
Mailing Address PO BOX 289 PO Box 289		10 07 2011
City	State Zip Code	Transaction ID : C1425734
Brent	AL 35034-0289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	1
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1025.00	
Full Name (Last, First, Middle Initial) 3. John S Meigs Jr	•	Date of Receipt
Mailing Address PO BOX 289 PO Box 289		10 14 2011
City	State Zip Code	Transaction ID : C1427695
Brent	AL 35034-0289	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Self Employed	Occupation Physician	
Receipt For:		1
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.00	
Full Name (Last, First, Middle Initial) 2. John S Meigs Jr	<u>'</u>	Date of Receipt
Mailing Address PO BOX 289 PO Box 289		10 20 / Y Y Y Y Y Y
City Brent	State Zip Code AL 35034-0289	Transaction ID : C1450708 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	1
Self Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1025.00	
SUBTOTAL of Receipts This Page (optional))	75.00
TOTAL This Period (last page this line numb	per only)	

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NAME OF COMMITTEE (In Full)		
American Academy of Family	Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Anne M Montgomery MD		Date of Receipt
Mailing Address 1708 S Martin St		10 28 2011
City	State Zip Code	Transaction ID : C1453313
Spokane	WA 99203-3751	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Inland Empire Hospital Services Associ	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General	00 0	
Other (specify) ▼	2500.00	
Full Name (Last, First, Middle Initial) Dale C Moquist MD		Date of Receipt
Mailing Address 14023 Southwest Fwy		10 17 _2011 _
City	State Zip Code	Transaction ID : C1433288
Sugar Land	TX 77478-3550	Amount of Each Receipt this Period
FEC ID number of contributing		T
federal political committee.	C	100.00
Name of Employer	Occupation	
Physicians at Sugar Creek	Family Physician]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) C. Elisabeth B Nadler MD		Date of Receipt
Mailing Address 2800 Dekalb St		10 07 2011
City	State Zip Code	Transaction ID : C1425741
Durham	NC 27705-5602	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	-
Duke University	family physician	1
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	365.00	
SUBTOTAL of Receipts This Page (optional).		715.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 23 OF 40 Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					FAGE	- 4	۷۵_	OF	40
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Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may not be sold or used by any per the name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commi	ttee
Full Name (Last, First, Middle Initial) Joseph Neller		Date of Receipt
Mailing Address 1118 Shelter Ln		10 11 2011
City	State Zip Code	Transaction ID : C1427689
Lansing	MI 48912-5026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.63
Name of Employer	Occupation	
MA AFP	Government Relations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 273.78	
Full Name (Last, First, Middle Initial) 3. Carrie E Nelson MD	1	Date of Receipt
Mailing Address 520 W Indiana St		10 15 2011
City	State Zip Code	Transaction ID : C1432663
Wheaton	IL 60187-2325	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	31.00
Name of Employer	Occupation	
McKesson Health Solutions	Medical Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	310.00	
Full Name (Last, First, Middle Initial) C. Javette C Orgain MD	·	Date of Receipt
Mailing Address PO BOX 806527		10 22 2011
City Chicago	State Zip Code IL 60680-4126	Transaction ID : C1498406 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer	Occupation	
UNIVERSITY OF ILLINOIS COLLEGE OF	MED PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	1150.00	
SUBTOTAL of Receipts This Page (optional)	201.63
TOTAL This Period (last page this line num	ber only)	

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for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Maureen O Padden MD, MPH Date of Receipt Mailing Address 2300 E St Nw Bureau Of Medicine And Surgery 2011 10 02 City Zip Code State Transaction ID: C1498331 DC Washington 20372-0001 Amount of Each Receipt this Period FEC ID number of contributing 35.00 federal political committee. Name of Employer Occupation **US Navy** Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 420.00 Other (specify) Full Name (Last, First, Middle Initial) B. Judith A Pauwels MD Date of Receipt Mailing Address 4245 Roosevelt Way Ne 10 07 2011 City State Zip Code Transaction ID: C1426885 WA Seattle 98105-6008 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Employed Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Elisabeth L Righter MD Date of Receipt Mailing Address 2345 Philadelphia Dr UW Health Fox Valley Family Medici 10 06 2011 City Zip Code State Transaction ID: C1426048 OH Dayton 45406-1816 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation University of WI School of Med. & Pub. Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 635.00 SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

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or for commercial purposes, other than usi NAME OF COMMITTEE (In Full)	ng the name and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	ily Physicians Political Action Comm	ITTEE
Full Name (Last, First, Middle Initial) Flora F Sadri-Azarbayejani DO		Date of Receipt
Mailing Address 427 S Mountain Rd		10 06 2011
City	State Zip Code	Transaction ID : C1426049
Northfield	MA 01360-9684	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	-
Gardner Family Medicine	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	450.00	
Full Name (Last, First, Middle Initial) Paul David Salzberg MD	•	Date of Receipt
Mailing Address PO BOX 898		M = M / D = D / Y = Y = Y
City	State Zip Code	10 29 2011 Transaction ID - C4452272
Callicoon	NY 12723-0898	Transaction ID : C1453373 Amount of Each Receipt this Period
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FEC ID number of contributing federal political committee.	C	60.00
Name of Employer	Occupation	7
Self-Employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	420.00	
Full Name (Last, First, Middle Initial) Sarah L Sams MD	I	Date of Receipt
Mailing Address 2994 Frazell Rd		Date of Receipt
Z994 Flazeli Ru		10 28 _ 2011 _
City	State Zip Code	Transaction ID : C1453312
Hilliard	OH 43026-9785	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Grant Medical Center	Physician	
Receipt For:	Aggregate Year-to-Date ▼	7
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (option	nal)	210.00
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TOTAL This Period (last page this line nu	imber only)	

Use separate schedule(s) for each category of the Detailed Summary Page

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

NAME OF COMMITTEE (In Full) American Academy of Family I Full Name (Last, First, Middle Initial) Dennis James S Sanchez MD Mailing Address 3529 Firestone Blvd Sanchez Medical Center City South Gate	Physicians Political Action Committ State Zip Code CA 90280-3031	Date of Receipt 10 25 2011
Dennis James S Sanchez MD Mailing Address 3529 Firestone Blvd Sanchez Medical Center City	•	10 25 2011
Sanchez Medical Center City	•	10 25 2011
•	•	
- Journ Gate	30200 3031	Transaction ID : C1452014
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Sanchez Medical Center	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) . Dean A Schultz MD		Date of Receipt
Mailing Address 1850 Hickory St Ste 103A		10 30 2011
City Abilene	State Zip Code TX 79601-2334	Transaction ID : C1453388 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer APCA	Occupation Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) George Wm Shannon MD		Date of Receipt
Mailing Address 2301 Slate Dr		10 28 2011
City Columbus	State Zip Code GA 31906-1443	Transaction ID : C1453316 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Horizons Diagnostics	Family Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	
SUBTOTAL of Receipts This Page (optional)	•	1050.00

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for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Brent Smith MD Date of Receipt Mailing Address 285 Normandy Cir 10 2011 City Zip Code State Transaction ID: C1427064 MS Madison 39110-9057 Amount of Each Receipt this Period FEC ID number of contributing 191.54 federal political committee. Name of Employer Occupation University of Mississippi Medical Cent Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 616.92 Other (specify) Full Name (Last, First, Middle Initial) B. Albert M Sterns MD Date of Receipt Mailing Address 1021 Drexel Pkwy 10 18 2011 City State Zip Code Transaction ID: C1448848 AL Birmingham 35209-6001 Amount of Each Receipt this Period FEC ID number of contributing 150.00 federal political committee. Name of Employer Occupation N.W Ala Emerg Phys Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Glen R Stream MD Date of Receipt Mailing Address 1708 S Martin St 10 28 2011 City Zip Code State Transaction ID: C1453315 WA Spokane 99203-3751 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Rockwood Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 841.54 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	the name and address of any political committee	
,	Physicians Political Action Commi	ittee
Full Name (Last, First, Middle Initial) Maureen P Strohm MD Mailing Address 39000 Bob Hope Drive Lucy Curci Cancer Center City Rancho Mirage FEC ID number of contributing federal political committee. Name of Employer Eisenhower Medical Center Receipt For: Primary General Other (specify)	State Zip Code CA 92270 C Occupation Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt 10 20 2011 Transaction ID: C1450711 Amount of Each Receipt this Period 365.00
Full Name (Last, First, Middle Initial) Harry S Strothers III Mailing Address 300-A Bldg 100 1513 E Cleveland Ave City East Point FEC ID number of contributing federal political committee. Name of Employer Morehouse School of Medicine Receipt For: Primary General Other (specify)	State Zip Code GA 30344 C Occupation Physician Aggregate Year-to-Date ▼ 273.78	Date of Receipt 10 10 2011 Transaction ID : C1427067 Amount of Each Receipt this Period 45.63
Full Name (Last, First, Middle Initial) Ray H Tangunan MD Mailing Address 6801 Us Highway 27 N Ste City Sebring FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	B State Zip Code FL 33870-7840 C Occupation Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt 10 27 2011 Transaction ID: C1452583 Amount of Each Receipt this Period 365.00
SUBTOTAL of Receipts This Page (optional).	<u> </u>	775.63
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 29 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Academy of Family Physicians Political Action Committee Full Name (Last, First, Middle Initial) Stacy J Taylor MD Date of Receipt Mailing Address 173 E Cotton Hill Rd 2011 10 City State Zip Code Transaction ID: C1427065 CT **New Hartford** 06057-3524 Amount of Each Receipt this Period FEC ID number of contributing 45.63 federal political committee. Name of Employer Occupation ProHealth Physicians LLC Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 273.78 Other (specify) Full Name (Last, First, Middle Initial) B. Todd A Thames MD Date of Receipt Mailing Address 333 N Santa Rosa St Apt F4703 10 01 2011 City State Zip Code Transaction ID: C1498328 TX San Antonio 78207-3108 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation CHRISTUS Santa Rosa Health System Physician, Residency Program Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Andrew J Ting MD Date of Receipt Mailing Address 15 Railroad Ave 10 07 2011 City Zip Code State Transaction ID: C1426878 MA S Hamilton 01982-2218 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Family Medicine Associates Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 145.63 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 30 OF

EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	`	eck on 11a 13	ly oi	ne) 11b 14	11c 15	12 16	17
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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Committ	tee					
Full Name (Last, First, Middle Initial) Lloyd P Van Winkle MD		Date of Receipt					
Mailing Address PO BOX 960		10 16 2011 .					
City							
Castroville	TX 78009-0960	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	45.63					
Name of Employer	Occupation						
Self	Physician						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	273.78						
Full Name (Last, First, Middle Initial) Jane A Weida MD		Date of Receipt					
Mailing Address 1011 Handsome PI		10 04 2011					
City	State Zip Code	Transaction ID : C1423448					
Lititz	PA 17543-9708	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С	125.00					
Name of Employer	Occupation						
Reading Hospital Famliy Medicine Resid	Family Physician/Faculty Associate						
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00						
Full Name (Last, First, Middle Initial) C. Thomas J Weida MD		Date of Receipt					
Mailing Address 845 Fishburn Rd		10 21 2011					
City Hershey	State Zip Code PA 17033-2015	Transaction ID : C1451232 Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	C	125.00					
Name of Employer	Occupation						
Hershey Medical Center	Physician						
Receipt For:	Aggregate Year-to-Date ▼						
Primary General Other (specify) ▼	250.00						
SUBTOTAL of Receipts This Page (optional).		295.63					
TOTAL This Period (last page this line number	er only)						

FOR LINE NUMBER:					PAGE	3	31	OF	40
(check only one)									
×	11a		11b		11c		12		
	13		14		15		16	;	17

	he name and address of any political committee	
NAME OF COMMITTEE (In Full) American Academy of Family	Physicians Political Action Commit	ttee
Full Name (Last, First, Middle Initial) Shawn Harper Dic West MD Mailing Address 7315 212th St Sw Ste 101 EDMONDS FAMILY MEDIC City Edmonds FEC ID number of contributing federal political committee. Name of Employer Puget Sound Family Physicians Receipt For: Primary General Other (specify) This is the state of the sta	State Zip Code WA 98026-7610 C Occupation Family Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt 10 01 2011 Transaction ID : C1422279 Amount of Each Receipt this Period 365.00
Full Name (Last, First, Middle Initial) Richard Andre Wherry MD Mailing Address 59 Tipton Dr City Dahlonega FEC ID number of contributing federal political committee. Name of Employer Chestatee Regional Hospital Receipt For: Primary General Other (specify)	State Zip Code GA 30533-1603 C Occupation Physician Aggregate Year-to-Date ▼ 2250.00	Date of Receipt 10 31 2011 Transaction ID : C1453397 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		615.00
TOTAL This Period (last page this line number	er only)	14486.20

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 OF 40 (check only one) 11a 11b 11c 12 13 14 X 15 16 17
			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Academy of Family	y Physicians	Political Action Comn	nittee
Full Name (Last, First, Middle Initial) A. American Academy of Family Phymaling Address 11400 Tomahawk Creek			Date of Receipt 10 07 2011
City Leawood	State KS	Zip Code 66211-2672	Transaction ID : C1422557 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		334.66
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 6922.47	
Full Name (Last, First, Middle Initial) American Academy of Family Ph	•		Date of Receipt
Mailing Address 11400 Tomahawk Creek I City Leawood	State KS	Zip Code 66211-2672	10 25 2011 Transaction ID : C1451964 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		246.14
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 6922.47	
Full Name (Last, First, Middle Initial) American Academy of Family I			Date of Receipt
Mailing Address 11400 Tomahawk Creek			10 31 2011
City Leawood	State KS	Zip Code 66211-2672	Transaction ID : C1454460 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		752.58
Name of Employer	Occupation		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 6922.47	
SUBTOTAL of Receipts This Page (optiona	l)		1333.38

TOTAL This Period (last page this line number only).....

1333.38

S 17

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 33 OF 4				
ITEMIZED DISBURSEMENTS	Use separate schedule(s) Check only one		TOMBETT:			
II LIVIIZED DISBUNSEIVIEN IS	for each category of the	X 21b	22 23 24 25 26			
	Detailed Summary Page	27	28a 28b 28c 29 30b			
Any information copied from such Reports and Statem						
or for commercial purposes, other than using the nam	e and address of any politi	cal committee to	solicit contributions from such committee.			
NAME OF COMMITTEE (In Full)		_				
American Academy of Family Phys	icians Political Acti	on Committ	ee			
Full Name (Last, First, Middle Initial)						
A. American Express			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address PO Box 53852			10 03 2011			
City	tate Zip Code					
	AZ 85072-3852		Transaction ID : D120188			
Purpose of Disbursement						
Bank card processing fee			Amount of Each Disbursement this Period			
Candidate Name		Category/	46.04			
Office Sought: House Disbursem	ent For:	Туре	7			
	Primary General					
President	Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial)						
B. American Express			Date of Disbursement			
Mailing Address PO Box 53852			10 06 2011			
Mailing Address FO Box 33632			10 00 2011			
•	tate Zip Code		Transaction ID : D120189			
Phoenix Purpose of Disbursement	AZ 85072-3852					
Bank card processing fee			Amount of Each Disbursement this Period			
Candidate Name		Category/				
		Type	8.13			
Office Sought: House Disbursem						
	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C. American Express			Date of Disbursement			
			M M / D D / Y Y Y Y			
Mailing Address PO Box 53852			10 07 2011			
City	tate Zip Code					
-	AZ 85072-3852		Transaction ID : D120190			
Purpose of Disbursement Bank card processing fee						
Candidate Name			Amount of Each Disbursement this Period			
Candidate Name		Category/	1.14			
Office Sought: House Disbursem	ent For:	Туре				
	Primary General					
	Other (specify) ▼					
State: District:						
			55.31			
SUBTOTAL of Disbursements This Page (optional)		·····	33.31			

Lies concrete cohedule(s)			PAGE 34 OF 40	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 23 28a 28b	24 25 26 28c 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nai				
NAME OF COMMITTEE (In Full) American Academy of Family Physics				ioni sucii committee.
Full Name (Last, First, Middle Initial)			Data of Dialayseas	
A. American Express			Date of Disbursen	
Mailing Address PO Box 53852			10 11	2011
City	State Zip Code		Transaction ID :	D120191
Phoenix Purpose of Disbursement	AZ 85072-3852			
Bank card processing fee			Amount of Each D	Disbursement this Period
Candidate Name		Category/		20.24
000		Type		20.31
Office Sought: House Disburse Senate President	ment For: Primary ☐ General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			5	
B. American Express			Date of Disbursen	
Mailing Address PO Box 53852			10 14	
City Phoenix	State Zip Code AZ 85072-3852		Transaction ID :	D120192
Purpose of Disbursement Bank card processing fee			Amount of Each D	Disbursement this Period
Candidate Name		Category/ Type	, ,	12.72
Office Sought: House Senate President State: Disburse	ment For: Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) C. American Express			Date of Disbursen	
Mailing Address PO Box 53852			10 17	2011
City Phoenix	State Zip Code AZ 85072-3852		Transaction ID :	D120774
Purpose of Disbursement Bank card processing fee				
Candidate Name		Category/ Type	Amount of Each D	Disbursement this Period 2.97
Office Sought: House Senate President State: Disburse	ment For: Primary ☐ General Other (specify) ▼	71	1	
State: District: SUBTOTAL of Disbursements This Page (optional). TOTAL This Period (last page this line number only				36.00

S	CHEDULE B (FEC Form 3X)	FOR I				R LINE NUMBER: PAGE 35 OF 40								
ΙT	EMIZED DISBURSEMENTS		arate schedule(s) category of the		(check only one)									
			Summary Page		$ \mathbf{X} ^2$	L	22		23 20h	24		25		26
_						27	28a		28b		Вс	29		30b
	ly information copied from such Reports and Statem for commercial purposes, other than using the name													
	NAME OF COMMITTEE (In Full)													
	American Academy of Family Phys	icians F	Political Action	on Co	omr	mitte	ee							
_	Full Name (Last, First, Middle Initial)						D .							
Α.	American Express						Date of	f Disk	ourser		Υ	Y Y	Y	
	Mailing Address PO Box 53852						10		18	3	:	2011		
	,	State	Zip Code				Trans	actio	n ID	D120	775			
	Phoenix Purpose of Disbursement	AZ	85072-3852				mans	uouo			,,,,			
	Bank card processing fee						Amount	t of E	Each I	Disbur	seme	nt this	Perio	d
	Candidate Name				egory /pe	//		. ,			,	1	3.07	
	Office Sought: House Disbursen Senate	nent For: Primary	General											
	President	Other (spe												
_	State: District:													
_	Full Name (Last, First, Middle Initial)						5							
В.	American Express						Date of	t Disk	ourser		V	Y Y	V	
	Mailing Address PO Box 53852						10]	19	_		2011		
	Phoenix	State AZ	Zip Code 85072-3852				Trans	sactio	on ID	: D120	0776			
	Purpose of Disbursement Bank card processing fee					71	Amount	t of E	ach [Disbur	seme	nt this	Perio	d
	Candidate Name				egory /pe	/		. ,			,		1.01	
		nent For: Primary Other (spec	General cify) ▼											
_	Full Name (Last, First, Middle Initial)													
C.	American Express						Date of	f Disk						
	Mailing Address PO Box 53852						10		20			2011	Y	
		State AZ	Zip Code 85072-3852				Trans	sactio	n ID	: D120)777			
	Purpose of Disbursement Bank card processing fee	<i></i>	03072-3032		-	╗								
	Candidate Name				egory /pe	7/	Amount	t of E	ach I	Disbur	seme		Perio	t
	Office Sought: House Disbursen	nent For:		.,				,			7			-
		Primary	General											
	President	Other (spe	cify) ▼											
	State: District:													
H	UBTOTAL of Disbursements This Page (optional) OTAL This Period (last page this line number only)					_				-		2	6.54	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 36 OF 40			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only				
	Detailed Summary Page	X 21b	22 23	24 25 26		
[<u> </u>	27	28a 28b	28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full)		_				
American Academy of Family Phy	sicians Political Actio	n Committ	ee			
Full Name (Last, First, Middle Initial)						
A. American Express			Date of Disbursemer	/		
Mailing Address PO Box 53852			10 24	2011		
City	State Zip Code		Transaction ID : D	120778		
Phoenix Purpose of Disbursement	AZ 85072-3852					
Bank card processing fee			Amount of Each Disk	oursement this Period		
Candidate Name		Category/ Type		5.85		
	ment For:					
Senate	Primary General					
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B. American Express			Date of Disbursemer	nt		
- American Express			M M / D D	/ Y Y Y Y		
Mailing Address PO Box 53852			10 26	2011		
City Phoenix	State Zip Code AZ 85072-3852		Transaction ID : D	120779		
Purpose of Disbursement Bank card processing fee			Amount of Each Disk	oursement this Period		
Candidate Name		Category/				
		Type		5.36		
Office Sought: House Disburse	ment For:					
Senate	Primary General					
State: President District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C. American Express			Date of Disbursemer			
Mailing Address DO Day 53953			10 28	2011		
Mailing Address PO Box 53852			10 20	2011		
City	State Zip Code		Transaction ID - D	120790		
Phoenix	AZ 85072-3852		Transaction ID : D	120/00		
Purpose of Disbursement Bank card processing fee						
Candidate Name		Category/	Amount of Each Dist	oursement this Period 0.65		
Office Sought: House Disburse	mont For	Туре		7		
Office Sought: House Disburse Senate	ment For: Primary General					
President	Other (specify)					
State: District:	(- j/ \					
SUBTOTAL of Disbursements This Page (optional).				11.86		
100 (5, 100)						
TOTAL This Period (last page this line number only)			7		

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 37 OF 40					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only					
	Detailed Summary Page	X 21b	22 23	24 25 26			
Г		27	28a 28b	28c 29 30b			
Any information copied from such Reports and State or for commercial purposes, other than using the national commercial purposes.	ments may not be sold or use me and address of any politica	ed by any perso al committee to	on for the purpose of s solicit contributions fro	oliciting contributions m such committee.			
NAME OF COMMITTEE (In Full)							
American Academy of Family Phys	sicians Political Actio	n Committe	ee				
Full Name (Last, First, Middle Initial)							
A. American Express			Date of Disburseme	nt /			
Mailing Address PO Box 53852			10 31	2011			
City	State Zip Code		Transaction ID : D	121311			
Phoenix Purpose of Disbursement	AZ 85072-3852						
Bank card collection fee			Amount of Each Dis	bursement this Period			
Candidate Name		Category/ Type		4.95			
Office Sought: House Disburse Senate	ment For: Primary General						
President State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial) B. Bank Of America Merchant Service	es		Date of Disburseme				
Mailing Address WA2-505-01-40 PO Box 2485			10 03	2011			
City Spokane	State Zip Code WA 99210-2485		Transaction ID : D	120187			
Purpose of Disbursement Bank card processing fees			Amount of Each Dis	bursement this Period			
Candidate Name		Category/ Type	7	664.24			
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼						
Full Name (Last, First, Middle Initial) C. Bank Of America Merchant Service			Date of Disburseme	nt			
C. Bank Of America Merchant Servic	85		M M / D D	/ Y Y Y Y			
Mailing Address WA2-505-01-40 PO Box 2485			10 20	2011			
City Spokane	State Zip Code WA 99210-2485		Transaction ID : D	121310			
Purpose of Disbursement							
Bank fee - Check Order00722 Candidate Name		Category/	Amount of Each Dis	bursement this Period 33.00			
Office Sought: House Disburse	ment For:	Туре					
Senate President	Primary General						
State: District:	Other (specify) ▼						
otato. District.							
SUBTOTAL of Disbursements This Page (optional).		·····•		702.19			
TOTAL This Period (last page this line number only)	·····•		831.90			

SCHEDULE B (FEC Form 3X)	SCHEDULE B (FEC Form 3X) FOR LINE NUMBER:		NUMBER: PAGE 38 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) FOR LINE (check only	None E
THE DISSOLUTION OF THE PROPERTY OF THE PROPERT	for each category of the Detailed Summary Page	` 21b	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports and Statem			
or for commercial purposes, other than using the nam	e and address of any polit	ical committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
$ \; angle$ American Academy of Family Phys	icians Political Acti	on Committ	ee
Full Name (Last, First, Middle Initial)			
A. AmeriPAC: The Fund for a Greater	America		Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 499 S. CAPITOL ST. S.W. #414			10 04 2011
City S	State Zip Code		
WASHINGTON	DC 20003		Transaction ID : D119891
Purpose of Disbursement			
Campaign contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Office Cought	ant Fau	Туре	2500.00
Office Sought: House Disbursen Senate	nent For: Primary General		
	Other (specify)		
State: District:	(- y) \		
Full Name (Last, First, Middle Initial)			
B. COMMITTEE FOR THE PRESERVA	TION OF CAPITALIS	SM (CPC)	Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address P.O. Box 65314			10 04 2011
City	State Zip Code		
Washington	DC 20036		Transaction ID: D119869
Purpose of Disbursement Campaign contribution			
1 0			Amount of Each Disbursement this Period
Candidate Name Rep. Charles Boustany		Category/	1000.00
Office Sought:	nent For:	Type	
	Primary General		
President	Other (specify) ▼		
State: LA District:			
Full Name (Last, First, Middle Initial)			
C. COMMITTE TO RE-ELECT ED TO	WNS		Date of Disbursement
Mailing Address 438 Lewis Avenue			10 25 2011
Mailing Address 456 Lewis Avenue			10 20 2011
City	State Zip Code		Transaction ID : D120671
,	NY 11233		Transaction ib . D120071
Purpose of Disbursement Campaign contribution			
Candidate Name			Amount of Each Disbursement this Period
Rep. Edolphus Towns		Category/ Type	2500.00
• •	nent For: 2012		
Senate	Primary General		
President	Other (specify) ▼		
State: NY District: 10			
CURTOTAL of Distance and Till D. ()			6000.00
SUBTOTAL of Disbursements This Page (optional)		······•	3333
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 39 OF 40					
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	NOMBELL.				
THE DISCOUNT OF THE PROPERTY O	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26				
	Dotanou Guillinary Lage	27	28a 28b 28c 29 30b				
Any information copied from such Reports and States							
or for commercial purposes, other than using the nar	ne and address of any politic	al committee to	solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)		•					
$ \; angle$ American Academy of Family Phys	sicians Political Actio	on Committ	ee				
Full Name (Last, First, Middle Initial)		İ					
A. FRIENDS OF ERIK PAULSEN			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address P.O. Box 44369			10 05 2011				
City	State Zip Code						
Eden Prairie	MN 55344		Transaction ID: D119940				
Purpose of Disbursement							
Campaign contribution		L II	Amount of Each Disbursement this Period				
Candidate Name		Category/	1000.00				
Rep. Erik Paulsen	nont For: 0040	Туре	1000.00				
Office Sought: House Disburser Senate	ment For: 2012 Primary General						
President	Other (specify)						
State: MN District: 03	· · · · · · · · · · · · · · · · · · ·						
Full Name (Last, First, Middle Initial)							
B. PALLONE FOR CONGRESS			Date of Disbursement				
			M M / D D / Y Y Y Y				
Mailing Address PO Box 3176			10 25 2011				
City	State Zip Code		T (1 ID D400000				
Long Branch	NJ 07740		Transaction ID : D120670				
Purpose of Disbursement Campaign contribution							
Candidate Name			Amount of Each Disbursement this Period				
Rep. Frank Pallone Jr.		Category/ Type	2500.00				
	nent For: 2012	Турс	, , , , , , , , , , , , , , , , , , , ,				
Senate	Primary General						
President	Other (specify) ▼						
State: NJ District: 06							
Full Name (Last, First, Middle Initial)			Data of Diskumanust				
C. SCHAKOWSKY FOR CONGRESS	5		Date of Disbursement				
Mailing Address P.O. BOX 5130			10 25 2011				
,	State Zip Code		Transaction ID : D120672				
EVANSTON Purpose of Disbursement	IL 60204						
Campaign contribution			Amount of Fook Dishurasment this Deviced				
Candidate Name		Catagony	Amount of Each Disbursement this Period				
Rep. Jan Schakowsky		Category/ Type	1000.00				
Office Sought: House Disburser	ment For: 2012						
Senate	Primary General						
President	Other (specify) ▼						
State: IL District: 09							
SUBTOTAL of Disbursements This Page (optional)			4500.00				
CODITAL OF BIOSCHOOLIGE THIS Fage (Optional)							
TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER: PAGE 40	OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b	22 X 23 24 25 28a 28b 28c 29	26
F		27		30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
American Academy of Family Phys	icians Political Action	on Committe	ee	
Full Name (Last, First, Middle Initial)			Data of Dishamous	
A. TIBERI FOR CONGRESS			Date of Disbursement	
Mailing Address 2931 E Dublin Granville Road Ste 2000			10 04 2011	Y
	State Zip Code			
Columbus	OH 43231		Transaction ID: D119870	
Purpose of Disbursement Campaign contribution		· · · · ·	Amount of Each Disbursement this	Period
Candidate Name		Category/	450	0.00
Rep. Pat Tiberi		Type	150	0.00
	nent For: 2012			
Senate President	Primary General Other (specify) ▼			
State: OH District: 12	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. TIBERI FOR CONGRESS			Date of Disbursement	
Mailing Address 2931 E Dublin Granville Road Ste 2000			10 04 2011	
Columbus	State Zip Code OH 43231		Transaction ID : D119871	
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this	Period
Candidate Name		Category/	100	0.00
Rep. Pat Tiberi		Type	100	0.00
Senate	nent For: 2012 Primary			
Full Name (Last, First, Middle Initial)				
C. PETE STARK RE-ELECTION COM	MITTEE		Date of Disbursement	
Mailing Address P.O. Box 8331			10 25 7 2011	Y
City	State Zip Code			
Fremont	CA 94537		Transaction ID: D120673	
Purpose of Disbursement Campaign contribution			Amount of Each Disbursement this	Period
Candidate Name		Category/		
Rep. Pete Stark		Type	250	0.00
Senate President	nent For: 2012 Primary General Other (specify) ▼			
State: CA District: 13				
SUBTOTAL of Disbursements This Page (optional)		·····•	5000	0.00
TOTAL This Period (last page this line number only)		>	15500	0.00